



SAN DIEGO COUNTY INDIAN GAMING LOCAL COMMUNITY BENEFIT COMMITTEE

Application Form For FY 2012-2013 Grants

- A. Name of Jurisdiction: **County of San Diego, HHSA, Aging & Independence Services**
- B. Mailing Address of Jurisdiction: **5560 Overland Ave, Ste. 310, San Diego, CA 92123**
- C. Name of Project: **Adult Protective Services—Maintaining the Health and Wellbeing of Seniors**
- D. Impacts are associated with which casino(s)? **Barona, Sycuan, and all other tribal casinos**
- E. The following uses are the priorities for receipt of grant money.
Please check all the priorities the project satisfies:

Law Enforcement	Fire Services	Emergency Medical Services
Environmental Impacts	Water Supplies	Waste Disposal
Behavioral Health X	Public Health X	Planning and Adjacent Land Uses
Roads	Recreation and Youth Programs	Child Care Programs

- F. On a separate sheet, please provide the following:

- 1) A complete description of the project;
- 2) Evidence showing the relationship between the project and impacts on your jurisdiction associated with the particular casino(s) listed under "D" above, and data linking the percentage of the requested funding to the percentage of impacts associated with particular casinos (include the data source); and
- 3) An explanation of how the proposed project will mitigate impacts of casino(s).

AB 2515 (2012) amended Government Code Section 12715(b)(1)(A) establishing all application policies and procedures for grants from the Individual Tribal Casino Account or County Tribal Casino Account. *Each grant application shall clearly show how the grant will mitigate the impact of the casino on the grant applicant.*

G. Type of grant for which you are applying: (Check each that applies)

1. **60% Nexus Grant (note that only County of San Diego Offices and Departments are eligible for this type of grant)¹ X**
2. **20% Non-Nexus Grant X**

These "20% Non-Nexus Grants" are intended only for local jurisdictions (County, cities and special districts) impacted by Barona and/or Sycuan Casinos.

3. **20% Non-Nexus Grant**

These "20% Non-Nexus Grants" are intended for local jurisdictions (County, cities and special districts) impacted by casinos of Tribes NOT paying into the Special Distribution Fund² and for assistance to local jurisdictions for one-time large capital projects.

- H. What is the project's estimated time frame? **FY 2013-2014**
- I. Proportionate share of the project expenditure that mitigates the impact from the casino(s): **5.6% of total Adult Protective Services budget**
- J. Amount of funding requested through this application: **\$467,909**
- K. What will be the total cost of the project? **\$8,355,521 (total APS budget)**

¹ County of San Diego is the only "local government jurisdiction" that meets two or more nexus criteria.

² Campo, La Jolla (proposed), La Posta, Pala, Pauma, Rincón, San Pasqual, Santa Ysabel and Viejas Bands.

- L. If total cost of the project exceeds amount of funding requested, please name other sources of funding that will be contributed to the project and the amount provided by each source: **2011 Realignment funds the Adult Protective Services program; these funds are derived from sales tax revenue.**
- M. On a separate sheet, please describe how you intend to meet the requirement that grant recipients must provide notice to the public, either through a slogan, signage or other mechanism, which states that the project has received funding from the Indian Gaming Special Distribution Fund and further identifies the particular Individual Tribal Casino Account from which the grant derives. **See Attached.**

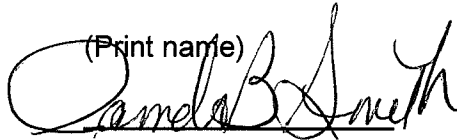
Please e-mail the complete Application to Eric.Lardy@sdcounty.ca.gov **AND** hand-deliver or mail a copy with the page containing the original Authorized Signature to the following address by **March 1, 2013**.

County of San Diego
Attn. Mr. Eric Lardy
1600 Pacific Highway
Room 212, MS A6
San Diego, CA 92101

I, Pamela Smith, hereby acknowledge that the grant funds requested herein shall be used solely for the purpose that to the best of my knowledge mitigates impacts from casino projects. In compliance with AB 158, I agree to ensure that all grant funds received shall be deposited in a separate interest-bearing account; and at the completion of the project, I agree to return any earned interest or cost savings from the project to the County for reallocation by the Indian Gaming Local Community Benefit Committee.

Submitted by: Pamela B. Smith

Title: Director, Aging & Independence Services

(Print name)


Date: 3/27/13

(Authorized Signature)

CONTACT PERSON: Name: Ellen Schmeding

Phone: 858-505-6329

Fax: 858-495-5964

E-mail Address: Ellen.Schmeding@sdcounty.ca.gov



SAN DIEGO COUNTY INDIAN GAMING LOCAL COMMUNITY BENEFIT COMMITTEE

Application Form For FY 2012-2013 Grants

- A. Name of Jurisdiction: **County of San Diego, HHSA, Aging & Independence Services**
- B. Mailing Address of Jurisdiction: **5560 Overland Ave, Ste. 310, San Diego, CA 92123**
- C. Name of Project: **Adult Protective Services—Maintaining the Health and Wellbeing of Seniors**
- D. Impacts are associated with which casino(s)? **Barona, Sycuan, and all other tribal casinos**
- E. The following uses are the priorities for receipt of grant money.
Please check all the priorities the project satisfies:

Law Enforcement	Fire Services	Emergency Medical Services
Environmental Impacts	Water Supplies	Waste Disposal
Behavioral Health X	Public Health X	Planning and Adjacent Land Uses
Roads	Recreation and Youth Programs	Child Care Programs

- F. On a separate sheet, please provide the following:

- 1) A complete description of the project;
- 2) Evidence showing the relationship between the project and impacts on your jurisdiction associated with the particular casino(s) listed under "D" above, and data linking the percentage of the requested funding to the percentage of impacts associated with particular casinos (include the data source); and
- 3) An explanation of how the proposed project will mitigate impacts of casino(s).

AB 2515 (2012) amended Government Code Section 12715(b)(1)(A) establishing all application policies and procedures for grants from the Individual Tribal Casino Account or County Tribal Casino Account. *Each grant application shall clearly show how the grant will mitigate the impact of the casino on the grant applicant.*

G. Type of grant for which you are applying: (Check each that applies)

1. **60% Nexus Grant (note that only County of San Diego Offices and Departments are eligible for this type of grant)¹ X**
2. **20% Non-Nexus Grant X**

These "20% Non-Nexus Grants" are intended only for local jurisdictions (County, cities and special districts) impacted by Barona and/or Sycuan Casinos.

3. **20% Non-Nexus Grant**

These "20% Non-Nexus Grants" are intended for local jurisdictions (County, cities and special districts) impacted by casinos of Tribes NOT paying into the Special Distribution Fund² and for assistance to local jurisdictions for one-time large capital projects.

- H. What is the project's estimated time frame? **FY 2013-2014**
- I. Proportionate share of the project expenditure that mitigates the impact from the casino(s): **5.6% of total Adult Protective Services budget**
- J. Amount of funding requested through this application: **\$467,909**
- K. What will be the total cost of the project? **\$8,355,521 (total APS budget)**

¹ County of San Diego is the only "local government jurisdiction" that meets two or more nexus criteria.

² Campo, La Jolla (proposed), La Posta, Pala, Pauma, Rincón, San Pasqual, Santa Ysabel and Viejas Bands.

- L. If total cost of the project exceeds amount of funding requested, please name other sources of funding that will be contributed to the project and the amount provided by each source: **2011 Realignment funds the Adult Protective Services program; these funds are derived from sales tax revenue.**
- M. On a separate sheet, please describe how you intend to meet the requirement that grant recipients must provide notice to the public, either through a slogan, signage or other mechanism, which states that the project has received funding from the Indian Gaming Special Distribution Fund and further identifies the particular Individual Tribal Casino Account from which the grant derives. **See Attached.**

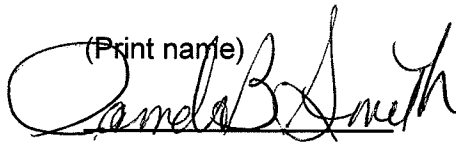
Please e-mail the complete Application to Eric.Lardy@sdcounty.ca.gov **AND** hand-deliver or mail a copy with the page containing the original Authorized Signature to the following address by **March 1, 2013**.

County of San Diego
Attn. Mr. Eric Lardy
1600 Pacific Highway
Room 212, MS A6
San Diego, CA 92101

I, Pamela Smith, hereby acknowledge that the grant funds requested herein shall be used solely for the purpose that to the best of my knowledge mitigates impacts from casino projects. In compliance with AB 158, I agree to ensure that all grant funds received shall be deposited in a separate interest-bearing account; and at the completion of the project, I agree to return any earned interest or cost savings from the project to the County for reallocation by the Indian Gaming Local Community Benefit Committee.

Submitted by: Pamela B. Smith

Title: Director, Aging & Independence Services

(Print name)


Date: 3/27/13

(Authorized Signature)

CONTACT PERSON: Name: Ellen Schmeding

Phone: 858-505-6329

Fax: 858-495-5964

E-mail Address: Ellen.Schmeding@sdcounty.ca.gov

SAN DIEGO COUNTY INDIAN GAMING LOCAL COMMUNITY BENEFIT COMMITTEE

Application Narrative For FY 2012-2013 Grants

Adult Protective Services – Maintaining the Health and Wellbeing of Seniors

Background

Aging & Independence Services (AIS) is a department within the County of San Diego, Health and Human Services Agency, serving seniors, adults with disabilities and their caregivers. AIS programs provide service to all regions of San Diego County, with offices located in Escondido, Oceanside, El Cajon, Chula Vista, La Mesa and San Diego. Adult Protective Services (APS) is a division of AIS and is responsible for providing services to seniors and dependent adults who are being harmed or threatened with harm. Social workers investigate physical, sexual, and financial abuse as well as neglect by others and self-neglect. APS staff help resolve the abusive situation and identify resources that can be used by the senior or dependent adult to help prevent further abuse.

Legislation was passed in 1998 that mandated the formation of the current Adult Protective Services program in the State of California. This legislation dramatically expanded the mandated reporting law for elder and dependent adult abuse and created a comprehensive adult protective services program in California for the first time.

At that time, an independent budget estimate for the program was developed that indicated that the actual cost of the program should be \$78 million statewide. Unfortunately, the APS program was never funded at the needed level, and only \$45,290,000 was allocated from State General fund in 1999. Since that time, almost no additional funding has been added to the APS State General Fund. Funding for APS has fallen from a statewide high of \$71,764,000 in 2000/2001 to a current level of \$45,147,000. Though the State included APS as part of the broader 2011 realignment of program funding to the local level, there has not yet been a significant increase in available funding for this program.

During the past 13 years, APS funding has also fallen far short of the inflationary increase in the cost of doing business. No cost-of-living increases have been added to the State allocation. At the current time, it is estimated that funding levels should be close to \$111 M statewide in order to keep up with the cost of doing business.

Legislation, Senate Bill 1018, was passed by the California State Legislature in 2006, and became law on January 1, 2007. This law mandated that employees of financial institutions report suspected elder and dependent financial abuse. No new funding was identified by the State to accompany this new requirement. Financial abuse reporting has climbed significantly since that time, with 38.22% of all current abuse reports including allegations of financial abuse. Financial abuse continues to be the single most prevalent type of abuse investigated and 30.4% of all confirmed abuse by others is financial in nature. Additionally, 14.5% of all self-neglect cases are confirmed for financial abuse. The effect on seniors can be devastating. The Journal of American Medical Association has reported a mortality rate three times higher for seniors who have been financially abused (Lachs et al, 1998).

APS workload is also on the rise – from FY 07/08 to FY 11/12 there has been an 11.1% increase in caseloads and there are fewer staff performing investigations. At the same time, the nature of the abuse reported has become more complex, as many of the cases involving financial abuse also require intensive investigation into the financial status of the individual, which can include review of trusts, wills and other financial instruments. Additionally, APS staff would like to provide more general education to older adults on the many scams occurring as well as other types of financial abuse, however, this has not been possible given the shortage of staff.

In FY 08/09, the Governor enacted a 10% across-the-board cut budget cut resulting in severe budgetary restrictions. This resulted in the elimination of 33% of the staff within the program and as a result, there are fewer staff available to investigate abuse and provide resources and assistance to those who have been abused. During the past year, several staff positions have been added, however, caseloads remain high and necessary work on prevention of abuse is not occurring.

Current Findings on Elder Abuse and Problem Gambling Among Seniors

Financial Abuse

Kay Brown, Director of the Government Accountability Office's Education Workforce and Income Security Program, recently (March 2011) presented a GAO report at a Senate hearing on elder abuse detailing the existing estimates of elder abuse cases being reported to authorities. Brown stated, "A 2009 study estimated that 14.1 percent of non-institutionalized older adults nationwide had experienced some form of elder abuse in the past year. In all likelihood, this underestimated the full extent of elder abuse because older adults who are highly cognitively impaired may be underrepresented in this study." A recent national study found that the one-year prevalence for current financial abuse by a family member is 5.2%, a much higher rate than reported in previous literature (Acierno et al., 2009).

According to an article published in *The Fresno Bee* (2007), "Protecting our Mothers and Fathers: Vulnerable Seniors Make Tempting Prey for Greedy Deceivers," The National Center on Elder Abuse estimated there were 400,000 reports of potential elder abuse

in the United States in 2000 and 70,000 in California. By 2010, over 76,000 reports were made to California's Adult Protective Services, an increase of 8.5%. (<http://www.dss.cahwnet.gov/>). Unfortunately, according to a study by researchers in New York State, only one in 44 cases of financial abuse is reported. Seniors hold more than 70% of the nation's wealth, according to the experts, and the likelihood of becoming a victim of financial abuse increases with age. Additionally, children and grandchildren, who should be their elders' protectors, sometimes turn out to be the greatest dangers. They seek to use their relatives' money to finance their own addictions to alcohol, drugs or gambling.

A 2011 elder abuse financial report issued by the MetLife Mature Market Institute found that elder financial abuse costs older Americans more than \$2.9 billion per year in legal fees, prosecution, investigations, social services, healthcare, and lost income—a 12% increase from 2008. Additionally, other long term effects include: credit problems, health issues, depression, and loss of independence.

Older Adult Gambling Trends

In 2006, The National Gambling Impact Study Commission (NGISC) reported that 125 million people gamble, with individuals over the age of 65 representing about 7.2% of this group. The NGISC reported the national past year casino gambling participation rates for 50 to 64 year-olds as 31.5% and 17.8% for those older than 64.

Overall, participation by older adults in gambling activities appears to be increasing. A 1975 prevalence study in the United States found that 35% of adults 65 and over had gambled in their lifetime. In contrast, a prevalence survey in 2001 found that 81% of adults ages 51 to 60 and 69% of those 61 years and older reported gambling in the past year; 12.6% of the former and 10.2% of the latter group gambled frequently, reporting rates of problem and/or pathological gambling of 3.3% and 1.2%, respectively. This suggests the number of older adults nationwide who visited casinos has doubled since 1975, a rate far surpassing any other age group.

Comparing the casino gambling practices of the elderly to those of younger gamblers, it is suggested that the number of senior customers in casinos is disproportionately higher. Several articles support this suggestion. University of Nevada professor William Thompson reported in his 1998 study of gambling in Wisconsin that 85 percent of casino customers in the state were over the age of 40, while 67 percent were over the age of 50. Additionally, Peggy Loroz of Gonzaga University noted in 2004 that a large portion of the customers in casinos were consumers over the age of 60. A 2006 study of gambling prevalence in the state of California reports that those who gamble weekly are more likely to be over the age of 65.

Problem Gambling

In 2006, the American Gaming Association stated the gambling revenues were reported to be \$90.9 billion in the United States and the National Gambling Impact Study

Commission (NGISC) estimated that the country has between 1.8 million and 2.5 million gambling addicts. The NGISC also noted that between 5 and 15% of gross gaming revenue is the result of problem and pathological gamblers. The Centre for Addiction and Mental Health in 2005 indicated an underreporting of the extent of problem and pathological gambling among older adults and reported gambling prevalence rates of 2.1% in people 60 and over. According to economic development expert Robert Goodman, each problem gambler has been estimated to cost government and the private economy \$13,200 a year.

There is growing evidence that older adults are gambling in record numbers. In a 2001 *American Journal of Geriatric Psychiatry* study, seniors rated a trip to a casino as their most popular day-trip social outing. David Oslin, MD, of the University of Pennsylvania and the study's senior author, suggested the older at-risk gamblers identified in the survey would not be considered pathological; nonetheless, the tendency to bet high and bet more than one can afford could be particularly perilous for an older person. He also found that 69% of older adults in this study had been involved in at least one gambling activity in the last year, and 11% could be considered "at-risk" gamblers. Further, Dr. Oslin stated: "These seniors who are at risk may not be ready for Gamblers Anonymous, but many of them don't have a lot of money, and spending it on gambling could mean that they won't have anything left to buy medicines." A 2012 report by the Consultant Pharmacist publication expresses concern that medication adherence may be compromised among elders who have gambling problems.

The 2008 study, "Characteristics of Problem Gamblers 56 Years or Older: A Statewide Study of Casino Self-Excluders," compared older adults to younger and middle-aged adults in a cohort of problem gamblers participating in a state-administered casino self-exclusion program. The results found older adults with longer gambling histories are more likely to report chronic medical and psychiatric problems, thoughts of suicide and have less social support. The 2008 study entitled, "Urban Elders and Casino Gambling: Are they at risk of a gambling problem?" (Institute of Gerontology, Wayne State University) had similar findings. The results showed that mental health disorders have consistently been associated with gambling disorders and gambling may soon become a serious health and financial problem among older adults. Additionally, the study revealed that one in five older adults who enter a casino eventually display problem gambling behaviors. Peter Lichtenberg, Ph.D., Director of the Institute of Gerontology and one author of the study, stated, "Urban elders are especially vulnerable to problems because a higher percentage of them have low income, few social supports and poor mental and physical health." Elders may experience severe financial loss, the erosion of personal relationships, depression, suicide, and substance abuse— all of which are closely associated with problem gambling.

As noted in a *Journal of Gerontological Social Work* article, "Senior Gambling: Risk or Reward (2009)," there is some concern that older adults face a unique set of factors that may place them at greater risk of developing gambling-related problems. Among these are loneliness, fixed incomes and vulnerability resulting from postretirement inactivity. Another concern is that the standard of living for those retirees on fixed incomes may

become seriously affected if they lose control over their gambling according to the 2008 article, "Casino Gambling among Older Adults in North Dakota." For most seniors, going to the casino is entertainment, but for about 8% it is an addiction that can cost them their retirement nest egg. Gambling counselors from the article reported that gambling pathology has a quicker progression among older adults than among younger adults. Additionally, while younger gamblers have time to recover their losses due to gambling, retired people often do not. Older persons who have gambled away their life savings or retirement funds have little time to recoup these financial losses.

In our region, casinos are readily accessible and provide pleasant recreation for the vast majority of older adults visiting. However, it is likely that some seniors are experiencing difficulties with curtailing their gambling, and are suffering ill effects. The ranges indicating problem gambling among seniors noted in the studies are broad--from 2% to as high as 17% in certain regions (Tirachaimongkol et al., 2010). The majority of studies cite the prevalence of problem and pathological gambling to be in the range 2 to 8% with 11% being 'at-risk' of developing problem gambling (Levins et al., 2005). Given the easy access to gambling in our community, it is likely that San Diego County has a higher number of older adults, as well as caregivers and family members, who are exhibiting problem gambling behaviors. APS data from San Diego's East County—a region in close proximity to casinos—reflects that 5.5% of abuse cases in 2012 had problem gambling as a factor.

Effects of Financial Abuse in Older Adults

History of Collaboration with the Tribes

To help address the rise in elder abuse, particularly in financial abuse, and to enhance the response to elder abuse resulting from problem gambling, Adult Protective Services successfully applied for funding during the FY 05-06, FY 08-09, and FY 10-11 funding cycles. With the receipt of \$200,000 in tribal funding in FY 05-06, APS was able to create an educational training and marketing campaign targeting financial institutions. This campaign garnered a National Association of Counties (NACo) award in 2007 and was shared throughout the State of California with other counties to train financial institutions on the new mandated reporting requirement. To view this information, visit: <http://sandiego.networkofcare.org/aging/elder-abuse.aspx>

During the past several years, with funding from the tribes, APS has worked collaboratively with the County Libraries and the County District Attorney's office to sponsor the very successful "Protect Yourself and Your Wallet" events, a winner of a 2009 National Association of Counties (NACO) award and the 2011 California State Association of Counties (CSAC) award. These seminars have been held throughout the county to educate older adults on how to protect themselves against attack or assault as well as how to prevent themselves from becoming victimized by financial abuse. A 74-year-old, third-degree black belt teaches the first hour showing ways to avoid trouble and what to do if you are attacked. After a free lunch, representatives from APS and the District Attorney's office discuss ways to avoid becoming a victim of scams, fraud

and financial abuse. A copy of the publication that is being shared with participants at that event and throughout the County is attached to this application. As of this date, the program has educated more than 1,200 seniors on self-defense at 27 locations throughout the county. Another 3,500 have received copies of the educational booklet. A DVD recording has also been completed and is helping to connect even more seniors to this important message. Attendees have rated the Senior Expos very highly as noted on the evaluation forms. The average overall satisfaction level is 4.85 on a 5-point scale with 5 being equivalent to "very useful" or "excellent."

During the past five years, 50,000 Vials of Life have been purchased and 40,000 have been distributed. The Vials are used by seniors and persons with disabilities throughout San Diego and provide these clients with a way to document pertinent medical information that is posted on their refrigerators to be viewed by paramedics if a crisis occurs leaving the client non-responsive. The Vials are an important preventive tool that is highly valued by both first responders and the medical community.

During the last award cycle, tribal funding was used to fund staff working on the front lines investigating abuse and neglect in the field. Approximately, 187 cases of abuse were investigated by designated front-line APS staff members. In addition, 75 cases that were investigated included information indicating that problem gambling could be considered a factor in the abusive situation.

APS has ensured that the public is aware that all of these important efforts have been funded by the tribal governments. This information has been displayed on posters and fliers advertising the "Protect Yourself and Your Wallet" events as well as in the booklet prepared for seniors that is distributed as a part of these events. In addition, at each event verbal recognition is given to the tribes. Tribal funding acknowledgement was also included as part of the previous financial institution educational training and marketing campaign materials that were distributed statewide. Additionally, recognition is prominently featured on the cover of the "Vials of Life." Finally, individuals who reached the AIS Call Center in the past to report elder abuse heard a recording that provides information about the tribal funding that has helped to fund our community's response to elder abuse.

Casino Impact

Casino impact on the County of San Diego, Health and Human Services Agency, Aging & Independence Services Division, includes financial abuse of elder and dependent adults by their caregivers, self-neglect and neglect of caregivers of elder and dependent adults. Financial abuse by a caregiver in order to fund gambling consists of, but is not limited to, the stealing of the abused adults' monetary assets, sale of household items and manipulation, threat and/or assault used to place the caregiver in a position of authority over the abused. The National Center on Elder Abuse, among many others, notes that one of the signs of a perpetrator of elder abuse is a problem with addictions, including gambling. Another related area of abuse related to gambling includes caregivers who are visiting casinos and not providing adequate services to the abused

adult, often leaving them unattended and not properly cared for, resulting in declining health and well-being.

Financial self-neglect on the part of the individual can occur with problem gambling to the point that the senior becomes unable to care for themselves or their homes appropriately and places themselves at serious risk of health and financial problems while continuing to gamble. These individuals may be experiencing early symptoms of Alzheimer's disease or other forms of mild cognitive impairment which limit executive functioning and decision-making capacity. Some of these seniors may have damage in the region of the brain known as the ventromedial prefrontal cortex, an area that affects the mental processes of belief and doubt. Research suggests that some older adults experience decline in their ability to take appropriate cost-benefit tradeoffs into account when making decisions (Zhu, Walsh, & Hsu, 2012), a cognitive deficit that could lead to problem gambling.

As noted previously in the Center for Addiction and Mental Health review, 70% of the older adult population visits casinos, with 8% of these experiencing problem gambling behaviors. In our community of 532,829 older adults who are 60 and above (SANDAG 2012 population data), if 70% of these individuals visit casinos (372,980), and 8% of these experience difficulties with gambling, 29,838 seniors could be impacted, or approximately 5.6% of the older adult population. Seniors are also directly impacted by the problem gambling behaviors of their family members and caregivers.

As noted, financial abuse, the category of abuse that is most directly connected to gambling activities, represents 30.4% of all abuse perpetrated by others and 14.5% of all self-abuse. This request for funding represents 5.6% of total APS funding (\$8,355,521) or \$467,909 for next fiscal year. The funding range requested is in proportion to the incidence of problem gambling behaviors in the older adult population, using the Center for Addiction and Mental Health estimate of those seniors with a gambling addiction. It also is consistent with data suggesting that 5.5% of APS cases in the East County region of San Diego involve a gambling component. We believe that APS sees a high percentage of individuals who are suffering from or victimized by problem gambling as it is this program's direct responsibility to address this type of financial abuse. Members of the public and financial institutions continue to report this type of abuse directly to APS.

Adult Protective Services case examples include:

- A live-in caregiver of a 72 year old man with dementia was taking his money and spending it on drugs and at the casinos. The caregiver made withdrawals at the casino ATM. The victim was not aware that the caregiver was using his money for gambling. APS worked with the victim's daughter who was becoming more involved in managing his money.
- The elderly husband goes to the casino almost every day and participates in various lottery and other scams. The elderly husband and wife have not paid

their mortgage in over a year. The husband cashed out all of the couple's retirement for his gambling addiction. APS worked with the daughter to try to get control of the finances.

- An 71 year old senior's son stole money (using his ATM). The son has a gambling addiction. He had been stealing smaller amounts of money out of victim's account with an ATM card. When the son took a larger amount, the victim contacted the bank and the son was caught on video surveillance. The victim did not know the son had learned his PIN. The son was removed from the victim's home and he was arrested.
- The victim's representative payee was withdrawing 96% of clients fund each month at casino ATMs. The payee confessed he used the victims' debit card without his permission for gambling. The client has a new representative payee. Social Security was notified of the fraud and a report was made to law enforcement.
- While hospitalized, an 84 year old woman discovered her son was spending over \$1,200 a night of her money at local casinos. Within a three month period, her son had used over \$70,000 of the client's savings. A police report was filed by APS on behalf of the woman. The woman took recommended steps with her financial institution to safeguard her remaining funds.
- An 88-year-old man discovered unusual activity on his and his wife's bank account. The gentleman's wife of 65 years had depleted almost all of their life savings of \$108,000 at local casinos. After APS intervention, the wife agreed to enter an outpatient treatment program. The gentleman was educated about how to safeguard the remainder of their assets and he took steps to do so.
- Law enforcement reported that an elderly man was left in a car in the parking lot of a local casino by his caregiver who was in the casino gambling. The man had to be transported to a local hospital to be medically evaluated.

Proposed Use of the Tribal Funding

During the past five years, with State cuts and insufficient revenue being generated by realignment, APS has had to dramatically reduce services to seniors and dependent adults in need in order to prioritize services for those most at risk. Fewer seniors and dependent adults are seen initially, more services are provided on the phone, and wait times have increased for mandated reporters of abuse contacting the AIS Call Center. Those individuals suffering from self-neglect, as a result of problem-gambling behaviors, or those seniors who are being victimized by unscrupulous caregivers or family members with gambling problems, are likely receiving fewer services than in the past due to the need for social workers to prioritize services for those individuals who have been physically abused.

Social workers providing services to seniors/dependent adults have also been forced to limit the assistance they are able to provide due to a lack of funding, no longer having the ability to purchase needed safety equipment or in-home care to help stabilize a senior's living situation. With the elimination of APS staff positions, caseloads have risen for the remaining staff. There has been a 58% increase in average program workload per social worker since the 2007/2008 fiscal year. During the same period, the average number of new case assignments per worker has increased 44.5%. The increased caseload makes it more difficult to devote the necessary time to each investigation of abuse or neglect.

These reductions to APS funding come at a critical time for senior services in our community. In San Diego County, we anticipate that the number of seniors and persons with disabilities will increase by 39% in the next 10 years, with a resulting increase in the number of older adults with dementia, chronic illness, mental illness, developmental disabilities and disabilities resulting from military service. We anticipate that more seniors will need APS assistance at a time when funding shortages are most severe. Additionally, the Governor and State legislature have realigned APS to the local level as part of his response to the severe State budget crisis, leaving future services for this vulnerable population uncertain. No additional funding for APS has been identified as part of realigning this important safety net program.

With the approval of the funding request for \$467,909, APS will continue to back-fill some of the reduced State funding for the program during the year allowing services to continue to be provided to vulnerable older adults. APS will fund staff positions that will allow for the provision of services to those most in need, and will allow for continued investigation of financial abuse for seniors who have put themselves at risk due to problem gambling or who are being victimized by others. Additionally, APS will utilize the funding to provide tangible services, such as safety equipment and in-home care, needed by the most vulnerable seniors and dependent adults to help stabilize their physical and emotional health.

As prevention is the most cost-effective solution to addressing financial abuse, APS will also utilize funding to continue to provide educational services targeted at reaching seniors throughout the County. APS would like to broaden outreach of the messages provided in the successful and award-winning "Protect Yourself and Wallet" events. Efforts may include creating a campaign against scams or coordinating with community partners such as Elder Law and Advocacy or our own Retired and Senior Volunteer Program (RSVP) to create a "Scam Squad" of trained volunteers. These peer volunteers would perform educational outreach to seniors in the community at senior residences, mobile home parks, and other venues. They would be outfitted with a toolkit of information, including a brief video with the images and words of actual scam victims, provided by the District Attorney's office. Further efforts could include partnering with CrimeStoppers to do TV reenactments of scams through Public Service Announcements (PSAs).

APS will also continue the Elder Abuse Councils, a group which meets quarterly to identify ways in which to prevent elder abuse of vulnerable seniors and includes representatives from law enforcement, the District Attorney's office, Adult Protective Services and others; and the Fiduciary Abuse Specialist Team (FAST) which brings together professionals who have financial expertise. Additionally, other elder abuse and neglect prevention efforts will be funded, including the purchase of Vials of Life and outreach to financial institutions and money wiring organizations. Furthermore, APS will partner with institutions who are researching cognitive issues in older adults that lead to risky financial behavior. These issues in an otherwise healthy and cognitively intact senior cause the individual to continue to engage in the risky financial behavior despite severe consequences to the senior's physical and financial well being. By partnering with these institutions, APS hopes to educate the community, law enforcement, and the judicial system about this serious issue.

Section M - Requirement to Notify the Public

APS has provided notification to the public regarding the funding received from the tribal governments as part of the previous educational campaigns. If APS receives funding from this grant application, any new educational or outreach materials that are created will feature a clearly visible attribution of tribal funding. In addition, the distribution of the booklet for seniors that provides helpful information on how to avoid becoming the victim of physical and financial abuse will continue to be widely shared, documenting receipt of tribal funding. DVD's of the popular "Protect Yourself and Your Wallet" workshops will also continue to be widely disseminated, as will the Vials of Life, both of which clearly document the receipt of tribal funding. Callers to the AIS Call Center will hear a message that relays information about the receipt of tribal funding to help address elder abuse in our community. Community outreach events and educational presentation will also include verbal recognition of tribal funding.